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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/775,019	02/01/2001	David Griffith	027-0001	7486
79140 7590 12/20/2011 ZAGORIN O'BRIEN GRAHAM LLP (027) 7600B N. CAPITAL OF TX HWY. SUITE 350 AUSTIN, TX 78731				
EXAMINER				
PASS, NATALIE				
ART UNIT		PAPER NUMBER		
3686				
MAIL DATE		DELIVERY MODE		
12/20/2011		PAPER		

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.




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**Board of Patent Appeals and Interferences**

ZAGORIN O'BRIEN GRAHAM LLP (027)  
 7600B N. CAPITAL OF TX HWY.  
 SUITE 350  
 AUSTIN, TX 78731

Appeal No: 2010-010197  
 Appellant: David Griffith  
 Application No: 09/775,019  
 Hearing Room: B  
 Hearing Docket: B  
 Hearing Date: Wednesday, January 11, 2012  
 Hearing Time: 09:00 AM  
 Location: Madison Building - East Wing  
 600 Dulany Street, 9th Floor  
 Alexandria, Virginia 22313-1450

**NOTICE OF HEARING  
 CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS**

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

**CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED.** This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

BPAI HEARINGS FAX No: (571) 273-0299

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In all communications relating to this appeal, please identify the appeal by its number.

**CHECK ONE:** ( ) HEARING ATTENDANCE CONFIRMED ( ) HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant \_\_\_\_\_

Date \_\_\_\_\_

Registration No. \_\_\_\_\_

Names of other visitors expected to accompany counsel: \_\_\_\_\_

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